FILED
Mar 31, 2005 8:00 am
Secretary of State

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

01

DOCUMENT # L03000020036

1. Entity Name
SUNSHINE PARTNERS GROUP, LLC.

Principal Place of Business	Mailing Address
6713 MAIN STREET, STE 240 MIAMI LAKES, FL 33014	6713 MAIN STREET, SUITE 240 MIAMI LAKES, FL 33014

200200084

03072005 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
14100 PALMETTO FRONTAGE ~~ROAD~~	14100 PALMETTO FRONTAGE RD
Suite, Apt. #, etc. 300	Suite, Apt. #, etc. SUITE 300
City & State MIAMI LAKES, FL	City & State MIAMI LAKES, FL
Zip 33016 Country US	Zip 33016 Country US

4. FEI Number ~~APPLIED FOR~~ 20-0034570 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

ROMERO, ARMANDO
6713 MAIN STREET, SUITE 240
MIAMI LAKES, FL 33014

7. Name and Address of New Registered Agent

Name ROMERO, ARMANDO
Street Address (P.O. Box Number is Not Acceptable) 14100 PALMETTO FRONTAGE ROAD
SUITE 300
City MIAMI LAKES FL Zip Code 33016

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ ARMANDO ROMERO 3/8/05
Signature, typed or printed name of Registered Agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM GALVIN, RAYMOND J II ~~6713 MAIN STREET, SUITE 240~~ MIAMI LAKES, FL 33014	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM ROMERO, ARMANDO ~~6713 MAIN STREET, SUITE~~ 240 ~~MIAMI LAKES, FL 33014~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition ADDRESS SAME AS ABOVE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM SHUMAN, DAVID S 6713 MAIN STREET, SUITE 240 MIAMI LAKES, FL 33014	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that electronic signatures shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #